

Governor's Autism Council

MEETING MINUTES

Thursday, August 11, 2016  
10:00 AM to 1:00PM  
Department of Health Services  
1 W. Wilson Street, Room 630  
Madison, WI 53703

**Council Members:** Nissan Bar-Lev, Wendy Coomer, Vivian Hazell, Shannon Knall(phone), Pam Lano, Milana Milan, Glenn Sallows  
**DHS Staff:** Daniel Kiernan, Autumn Knudtson, Deb Rathermel, Rachel Currans-Henry, Nancy Bills, Alyssa Zirk  
**Public Attendees:** Stacie Ferg, Katie Saint, Tabitha, Elizabeth Doll, Matt Doll, Tamlynn Granpner

The meeting commenced at 10:08am

**1. Welcome and Introductions**

Members of the Council and Department of Health Services (DHS) staff introduced themselves.

**2. Public Testimony**

There were no public comments.

**3. Operational**

Council members reviewed minutes from the meeting held May 12, 2016. Minutes were approved. DHS asked that the topic 2017 CLTS Waiver renewal efforts be moved to the beginning of the meeting.

**4. 2017 CLTS Waiver Renewal efforts**

Deb Rathermel gave a summary of the 2017 CLTS Waiver Renewal. Waivers are on a 5 year renewal cycle with the Center for Medicare & Medicaid Services (CMS). The application is currently posted for public comment. The comment period has been extended through August 18, 2016 and is available on the DHS website. DHS will review public comments and submit the waiver application to CMS around September 1, 2016. CMS has 90 days to review and finalize approval. Waiver will take effect January 1, 2017. CMS required changes include the removal of EPSDT, nursing services, personal care services, some adaptive aids, and some specialized therapeutic supplies. DHS is looking to transition services seamlessly and is working with county waiver agencies to transition services. DHS is proposing adding 3 new services to the waiver. The services are child care, training for unpaid caregivers, and relocation services.

The Home and Community Based Services Final Settings Rule mandates that all settings where waiver services provided need to meet certain CMS requirements. All settings need to be integrated and community inclusive. States need to come into compliance by 2019. CMS has also mandated a state based system for provider enrollment, credentialing, and certification and the creation of state wide rate setting methodology effective January 1, 2018. DHS is also revising performance measures and creating more outcomes based measures. Lastly, DHS is looking to start a state managed wait list. Currently access to services is determined county by county. CMS has always had the expectation of a state wide wait list.

Milana M. asked if these services have been available on both waiver and Medicaid previously. Deb R. stated that people were not accessing services under both programs at the same time. There were two pathways. CMS wants only one pathway. Waiver is the funding of last resort, anything that is funded by Medicaid cannot be funded by waiver.

Nissan B-L. asked if DHS is looking into ASD treatment services online. DCHAA is looking into services like this. DHS currently requires that a treatment provider is physically present with the participant. WEAP currently provides some services through telehealth through private insurance.

Pam L. asked what the time line is for a state managed wait list. Deb R. stated that a state managed wait list is tied to the budget process. DHS is still in discussion with CMS.

Pam L. asked what the daily living skills benefit currently looks like on the waiver. Deb R. said that there are no changes. Daily living skills is a much broader service vs. treatment.

## **5. Behavioral Treatment Benefit**

Rachel Currans-Henry and Dan Kiernan gave an update on Medicaid prior authorizations, claims data, and provider enrollment data. Autumn Knudtson gave prior authorization updates for children who are currently enrolled in the CLTS waiver and children who used to be on the CLTS waiver autism wait list. The Bureau of Children's Services is creating letters for county waiver agencies to send to families of children who have not yet received a prior authorization.

The council discussed treatment in schools. The Department of Public Instructions currently says that treatment is allowed in schools. This is contrary to what the council has heard in the past. Nissan B-L suggested that DHS follow up with DPS for confirmation on this issue.

## **6. Role of the Council**

Wendy C. presented a report on the role of the council. The council is repurposing priorities as autism treatment is no longer on the waiver. The workgroup recommended broadening the mission statement within parameters of recognizing other groups' mission statements. The council's priorities are early intervention, keeping parents informed, working with DPI to resolve issues, and to advise DHS, SWD, and DPI with transitions.

The council also discussed finding new members. County representation is a priority.

## **Meeting Adjournment**

The meeting adjourned at 12:27pm.